Edgar Filing: Extra Space Storage Inc. - Form 4

Extra Space S	Storage Inc.										
Form 4											
February 20, 2	2015										
FORM	4								PPROVAL		
	UNITEDS	STATES SECUR Was	ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check this if no longe	ər							Expires:	January 31,		
subject to	STATEM	ENT OF CHAN	GES IN BENEFICIAL OWNERSHIP O				NERSHIP OF	Estimated average			
Section 16		SECURITIES					S burden h				
Form 4 or Form 5				a	-	1		response	0.5		
obligation	~ ~	uant to Section 10									
may contin	Section 1719) of the Public Ut $20(h)$ of the Irac	•	•	• •			n			
See Instruc	ction	30(h) of the In	vestment	Company	y Aci	01 19	40				
1(b).											
(Print or Type R	esponses)										
· • • •											
1. Name and Ad	dress of Reporting P	Person <u>*</u> 2. Issuer	Name and	Ticker or 7	Гradin	g	5. Relationship of	f Reporting Per	son(s) to		
McNeal Gwy					Issuer						
McNeal Gwyn Goodson Symbol Extra Spa			Space Storage Inc. [EXR]				(Chast all applicable)				
*			f Earliest Transaction				(Check all applicable)				
		(Month/D		ansaction			Director	10%	6 Owner		
2795 E COT	TONWOOD	02/18/20	-				X Officer (give		er (specify		
PARKWAY	, SUITE 400						below) EVP/C	below) hief Legal Offi	cer		
	(Street)	4 If A	- Jan and Dad					-			
			Amendment, Date Original d(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
		Thed(with	ui/Day/1Cal)				_X_ Form filed by (One Reporting Pe	erson		
SALT LAKE	E CITY, UT 8412	21					•	More than One Re	eporting		
							Person				
(City)	(State) (Zip) Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	A. Deemed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if		onAcquired				Form: Direct	Indirect		
(Instr. 3)		any (Month/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				•		Beneficial Ownership		
		(Wonun/Day/Tear)	(11150. 0)	(111501.5,	4 anu	5)	Following	(Instr. 4)	(Instr. 4)		
					(A)		Reported				
					(A) or		Transaction(s)				
			Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	02/18/2015		А	4,015 (1)	А	\$ 0 (1)	11,874	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration E	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 65.45	02/18/2015		А	2,900	(2)	02/18/2025	Common Stock	2,900	\$

Edgar Filing: Extra Space Storage Inc. - Form 4

Reporting Owners

Reporting Owner Name / Address			Relationships		
	Director	10% Owner	Officer	Other	
McNeal Gwyn Goodson 2795 E COTTONWOOD PARKWA SUITE 400 SALT LAKE CITY, UT 84121	ΑY		EVP/Chief Legal Officer		
Signatures					
Grace Kunde - attorney in fact	02/20/2015				
**Signature of Reporting Person	Date				

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Restricted stock awards vest 25% annually over four years, beginning on the first anniversary of the grant date. The market value on the grant date was \$65.45.
- (2) Stock options vest 25% annually over four years, beginning on the first anniversary of the grant date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.